

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 196

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union (OPEIU) JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

**A. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
The Woodlands TX 77382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN INCOME LIFE INSURANCE

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758583

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
The Woodlands TX 77382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN INCOME LIFE INSURANCE

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758584

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Steven K Greer**

Mailing Address 43 Nocturne Woods Pl

City State Zip Code  
The Woodlands TX 77382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN INCOME LIFE INSURANCE

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2015

Transaction ID : C6758585

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00